U.S. Application No. 09/831,888
Reply to Office Action dated June 20, 2003

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DEC 2 3 2003

TECHNOLOGY CENTER R3700

DOCKET NO.: 208858US0 PCT

IN THE UNITED STATES PATENT & TRADEMARK OFFICE

IN RE APPLICATION OF:

DAVID LEWIS ET AL

: EXAMINER: MITCHELL

SERIAL NO.: 09/831,888

FILED: JULY 19, 2001

: GROUP ART UNIT: 3761

FOR: PRESSURISED METERED DOSE:

INHALERS (MDI)

TECH CENTER 1600/200

REQUEST FOR RECONSIDERATION

COMMISSIONER FOR PATENTS ALEXANDRIA, VA. 22313

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SIR:

In response to the Office Action dated June 20, 2003, Applicants respectfully request reconsideration of the above-identified application in view of the following remarks.

Remarks/Arguments begin on page 2 of this paper.

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PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000

Application or Docket Number

09/831888

CLAIMS AS FILED - PART I. (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER	
TOTAL CLAIMS			TOORDINA	17		1111 2)				OR 1	SMALL	
FOR			NUMBER FILED		NUMBER EXTRA		·	RATE BASIC FEE	FEE	OR	RATE BASIC FEE	FEE 860
TOTAL CHARGEABLE CLAIMS			/0 mir	us 20=	•	•		X\$ 9=		OR	X\$18=	0.00
INDEPENDENT CLAIMS			2 minus 3 =					X40≃		OR	X80=	
ML	LTIPLE DEPEN	IDENT CLAIM P	RESENT					+135=		OR	+270=	·
* If the difference in column 1 is less than zero, enter "0" in column 2							TOTAL		OR	TOTAL	860	
	CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							SMALL I	ENTITY	OR	OTHER SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 34	Minus	.3	4	= —		X\$ 9=		OR	X\$18=	
	Independent	NTATION OF M	Minus	PENDEN	5 T CLANA	=		X40=		OR	X80=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+135=		OR	+270=	
	- •							TOTAL ADDIT, FEE		OR	TOTAL ADDIT, FEE	
(Column 1) (Column 2) (Column 3)										•		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total ·	•	Minus	**		2		X\$ 9=		ОR	X\$18=	·
	Independent	AUTATION OF AU	Minus	***		=	11	X40=	÷	OR	X80=	
	ring i Phese	NTATION OF MU	JUIPLE DEF	ENUEN	CLAIM	U	J	+135=		OR	+270=	
						•		TOTAL ADDIT, FEE		OR	TOTAL ADDIT, FEE	
		(Column 1)		(Colui	mn 2)	(Column 3)	Le.			•		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM	HEST BER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	••		5	IJ	X\$ 9=		OR	X\$18=	
	Independent	•	Minus	***		=	1	X40=		OR	X80=	
	FIRST PRESE	IRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							·			- 1
• ;	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+270=	
***	"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										TOTAL ADDIT. FEE	
•	The "Highest Num	ber Previously Pai	d For (Total or	Independ	ient) is the	highest number	er fou	nd in the app	ropriate box	in co	lumn 1.	